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#172  
PATENT  
TECH CENTER 1800/2800  
Attorney Docket No.: 019957-013820US  
Client Reference No.: 03

APR 07 2003

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TOWNSEND and TOWNSEND and CREW LLP

By: Mark T. Davis

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Shawn DeFrees et al.

Application No.: 09/442,111

Filed: November 17, 1999

For: LOW COST MANUFACTURE OF  
OLIGOSACCHARIDES

Examiner: C. Fronda

Art Unit: 1652

SECOND SUPPLEMENTAL  
INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

The references cited on attached form PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed.

Also enclosed is a copy of the Search/Examination report corresponding to the European application.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

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representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

  
Beth L. Kelly  
Reg. No. 51,868

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SF 1444255 v1

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**FEE TRANSMITTAL****for FY 2003**

MAR 31 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 180)**Complete If Known**

Application Number	09/442,111
Filing Date	November 17, 1999
First Named Inventor	DeFrees, Shawn
Examiner Name	C. Fronda
Group Art Unit	1652
Attorney Docket No.	019957-013820US

**METHOD OF PAYMENT (check all that apply)**

Check     Credit Card     MoneyOrder     Other     None

Deposit Account:

Deposit Account Number **20-1430**

Deposit Account Name **Townsend and Townsend and Crew LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below     Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

**SUBTOTAL (1)** (\$)**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	-**	=	Extra Claims	X	Fees from below	=	Fee Paid
Independent Claims							
Multiple Dependent				X			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$)

\*\* or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Entity	Small Entity	Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	1053 130	1053 130	Surcharge - late filing fee or oath	
1052 50	2052 25	1812 2,520	1812 2,520	Surcharge - late provisional filing fee or cover sheet.	
1804 920*	1804 920*	1805 1,840*	1805 1,840*	Non-English specification	
1805 1,840*	1805 1,840*	1804 920*	1804 920*	For filing a request for reexamination	
1251 110	2251 55	1252 410	2252 205	Requesting publication of SIR prior to Examiner action	
1253 930	2253 465	1254 1,450	2254 725	Requesting publication of SIR after Examiner action	
1255 1,970	2255 985	1401 320	2401 160	Extension for reply within first month	
1402 320	2402 160	1403 280	2403 140	Extension for reply within second month	
1451 1,510	1451 1,510	1452 110	2452 55	Extension for reply within third month	
1453 1,300	2453 650	1501 1,300	2501 650	Extension for reply within fourth month	
1502 470	2502 235	1503 630	2503 315	Extension for reply within fifth month	
1460 130	1460 130	1401 320	2401 160	Notice of Appeal	
1807 50	1807 50	1402 320	2402 160	Filing a brief in support of an appeal	
1806 180	1806 180	1403 280	2403 140	Request for oral hearing	
8021 40	8021 40	1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1809 750	2809 375	1452 110	2452 55	Petition to revive - unavoidable	
1810 750	2810 375	1453 1,300	2453 650	Petition to revive - unintentional	
1801 750	2801 375	1501 1,300	2501 650	Utility issue fee (or reissue)	
1802 900	1802 900	1502 470	2502 235	Design issue fee	
		1503 630	2503 315	Plant issue fee	
		1460 130	1460 130	Petitions to the Commissioner	
		1807 50	1807 50	Petitions related to provisional applications	
		1806 180	1806 180	Submission of Information Disclosure Stmt	180
		8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
		1809 750	2809 375	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810 750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))	
		1801 750	2801 375	Request for Continued Examination (RCE)	
		1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)**

(\$180)

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Beth Kelly	Registration No. (Attorney/Agent)	51,868	Telephone	415-576-0200
Signature					Date

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SF 1439714 v1

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